

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

SOCIAL SECURITY INSTITUTE PAC INC

ADDRESS (number and street) ▼

PO BOX 216

☐ Check if different than previously reported. (ACC)

THE PLAINS

VA

20198

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00542258

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☒ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y  
04 01 2013

through

M M M / D D D / Y Y Y Y Y Y  
06 30 2013

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Georganna Hunter

Signature of Treasurer

Georganna Hunter

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
07 11 2013

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

SOCIAL SECURITY INSTITUTE PAC INC

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
04 / 01 / 2013 To: M M / D D / Y Y Y Y Y Y  
06 / 30 / 2013

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">2013</span>		0.00
(b) Cash on Hand at Beginning of Reporting Period.....	6664.46	
(c) Total Receipts (from Line 19) .....	24280.00	56614.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	30944.46	56614.00
7. Total Disbursements (from Line 31) .....	28691.12	54360.66
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	2253.34	2253.34
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# DETAILED SUMMARY PAGE

## of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

SOCIAL SECURITY INSTITUTE PAC INC

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y  
 04 / 01 / 2013

To:

 M M / D D / Y Y Y Y Y  
 06 / 30 / 2013
**I. Receipts**
**COLUMN A**  
**Total This Period**
**COLUMN B**  
**Calendar Year-to-Date**

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

500.00

700.00

(ii) Unitemized .....

23780.00

55914.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

24280.00

56614.00

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ..... ▶

24280.00

56614.00

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

## 19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c)) ..... ▶

24280.00

56614.00

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ..... ▶

24280.00

56614.00

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	28691.12	54360.66
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	28691.12	54360.66
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	28691.12	54360.66
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	28691.12	54360.66

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	24280.00	56614.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	24280.00	56614.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	28691.12	54360.66
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	28691.12	54360.66

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 6 OF 25

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**SOCIAL SECURITY INSTITUTE PAC INC**

Full Name (Last, First, Middle Initial)

**A. Judith Friend**

Mailing Address PO Box 1118

City

Cambria

State

CA

Zip Code

93428

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2013

☐ Primary ☐ General  
☒ Other (specify) ▼ Other

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 09 / 2013

**Transaction ID : SA11AI.6181**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Judith Friend**

Mailing Address PO Box 1118

City

Cambria

State

CA

Zip Code

93428

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2013

☐ Primary ☐ General  
☒ Other (specify) ▼ Other

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 12 / 2013

**Transaction ID : SA11AI.6182**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

500.00

500.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 7 OF 25

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SOCIAL SECURITY INSTITUTE PAC INC**

Full Name (Last, First, Middle Initial)

**A. Allegiance Direct, LLC**

Mailing Address 421 East E Street

City	State	Zip Code
Purcellville	VA	20132

Purpose of Disbursement  
Direct Mail Fundraiser

003

Candidate Name

**SOCIAL SECURITY INSTITUTE PAC INC**Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05	/	01	/	2013

**Transaction ID : SB21B.7288**

Amount of Each Disbursement this Period

4920.67
---------

Full Name (Last, First, Middle Initial)

**B. American Caging, Inc.**

Mailing Address 4850 Wright Road Ste 168

City	State	Zip Code
Stafford	TX	77477

Purpose of Disbursement  
Caging Fees

001

Candidate Name

**SOCIAL SECURITY INSTITUTE PAC INC**Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04	/	30	/	2013

**Transaction ID : SB21B.7289**

Amount of Each Disbursement this Period

377.23
--------

Full Name (Last, First, Middle Initial)

**C. American Caging, Inc.**

Mailing Address 4850 Wright Road Ste 168

City	State	Zip Code
Stafford	TX	77477

Purpose of Disbursement  
Caging Fees

001

Candidate Name

**SOCIAL SECURITY INSTITUTE PAC INC**Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05	/	07	/	2013

**Transaction ID : SB21B.7290**

Amount of Each Disbursement this Period

787.80
--------

**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

6085.70
---------

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: 97 `A-G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB  
.

Form/Schedule: SB21B  
Transaction ID : SB21B.7288

This expenditure was made for promotion of the Social Security Institute PAC, its mission and to raise funds to support this mission. No portion of this expenditure was made on behalf of, or in opposition to, any specifically identified Federal candidate. This activity did not 'expressly advocate the election or defeat of any Federal candidate'.

Form/Schedule:  
Transaction ID:



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 9 OF 25

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**SOCIAL SECURITY INSTITUTE PAC INC**

Full Name (Last, First, Middle Initial)

**A. Capital One Bank**

Mailing Address PO Box 152402

City Irving                      State TX                      Zip Code 75015

Purpose of Disbursement  
Bank Charges

001

Candidate Name

**SOCIAL SECURITY INSTITUTE PAC INC**Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:                      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04                      01                      2013
**Transaction ID : SB21B.7291**

Amount of Each Disbursement this Period

147.87

Full Name (Last, First, Middle Initial)

**B. Capital One Bank**

Mailing Address PO Box 152402

City Irving                      State TX                      Zip Code 75015

Purpose of Disbursement  
Bank Charges

001

Candidate Name

**SOCIAL SECURITY INSTITUTE PAC INC**Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:                      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04                      04                      2013
**Transaction ID : SB21B.7292**

Amount of Each Disbursement this Period

7.95

Full Name (Last, First, Middle Initial)

**C. Capital One Bank**

Mailing Address PO Box 152402

City Irving                      State TX                      Zip Code 75015

Purpose of Disbursement  
Bank Charges

001

Candidate Name

**SOCIAL SECURITY INSTITUTE PAC INC**Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:                      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04                      05                      2013
**Transaction ID : SB21B.7293**

Amount of Each Disbursement this Period

25.00

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

180.82

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 10 OF 25

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SOCIAL SECURITY INSTITUTE PAC INC**

Full Name (Last, First, Middle Initial)

**A. Capital One Bank**

Mailing Address PO Box 152402

City	State	Zip Code
Irving	TX	75015

Purpose of Disbursement  
Bank Charges

001

Candidate Name

**SOCIAL SECURITY INSTITUTE PAC INC**Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		08		2013

**Transaction ID : SB21B.7294**

Amount of Each Disbursement this Period

0.44
------

Full Name (Last, First, Middle Initial)

**B. Capital One Bank**

Mailing Address PO Box 152402

City	State	Zip Code
Irving	TX	75015

Purpose of Disbursement  
Bank Charges

001

Candidate Name

**SOCIAL SECURITY INSTITUTE PAC INC**Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		11		2013

**Transaction ID : SB21B.7295**

Amount of Each Disbursement this Period

25.00
-------

Full Name (Last, First, Middle Initial)

**C. Capital One Bank**

Mailing Address PO Box 152402

City	State	Zip Code
Irving	TX	75015

Purpose of Disbursement  
Bank Charges

001

Candidate Name

**SOCIAL SECURITY INSTITUTE PAC INC**Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		12		2013

**Transaction ID : SB21B.7296**

Amount of Each Disbursement this Period

200.00
--------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

225.44
--------

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<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

SOCIAL SECURITY INSTITUTE PAC INC

Three digital displays showing the date in MM/DD/YYYY format: 04/17/2013.

25.00

State:  District:

25.00

State:  District:

39.82

State:  District:

Category	Percentage
Students who did not pass the exam	89.82%









<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

SOCIAL SECURITY INSTITUTE PAC INC

001

Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

001

Category/  
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

001

Category/  
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

1558.34

FEC Schedule B (Form 3X) Rev. 02/2003



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**SOCIAL SECURITY INSTITUTE PAC INC**

Full Name (Last, First, Middle Initial)

**A. Infocision**

Mailing Address 325 Springside Drive

City Akron State OH Zip Code 44333

Purpose of Disbursement  
Telemarketing Fundraiser

003

Candidate Name

**SOCIAL SECURITY INSTITUTE PAC INC**Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 02 2013**Transaction ID : SB21B.7316**

Amount of Each Disbursement this Period

402.25

Full Name (Last, First, Middle Initial)

**B. Infocision**

Mailing Address 325 Springside Drive

City Akron State OH Zip Code 44333

Purpose of Disbursement  
Telemarketing Fundraiser

003

Candidate Name

**SOCIAL SECURITY INSTITUTE PAC INC**Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 24 2013**Transaction ID : SB21B.7317**

Amount of Each Disbursement this Period

109.33

Full Name (Last, First, Middle Initial)

**C. Infocision**

Mailing Address 325 Springside Drive

City Akron State OH Zip Code 44333

Purpose of Disbursement  
Telemarketing Fundraiser

003

Candidate Name

**SOCIAL SECURITY INSTITUTE PAC INC**Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 02 2013**Transaction ID : SB21B.7318**

Amount of Each Disbursement this Period

3239.84

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3751.42

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB  
.

Form/Schedule: SB21B

Transaction ID : SB21B.7316

This expenditure was made for promotion of the Social Security Institute PAC, its mission and to raise funds to support this mission. No portion of this expenditure was made on behalf of, or in opposition to, any specifically identified Federal candidate. This activity did not 'expressly advocate the election or defeat of any Federal candidate'.

Form/Schedule: SB21B

Transaction ID: SB21B.7317

This expenditure was made for promotion of the Social Security Institute PAC, its mission and to raise funds to support this mission. No portion of this expenditure was made on behalf of, or in opposition to, any specifically identified Federal candidate. This activity did not 'expressly advocate the election or defeat of any Federal candidate'.

: 97 `A-G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB  
.

Form/Schedule: SB21B  
Transaction ID : SB21B.7318

This expenditure was made for promotion of the Social Security Institute PAC, its mission and to raise funds to support this mission. No portion of this expenditure was made on behalf of, or in opposition to, any specifically identified Federal candidate. This activity did not 'expressly advocate the election or defeat of any Federal candidate'.

Form/Schedule:  
Transaction ID:

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

SOCIAL SECURITY INSTITUTE PAC INC

Three digital displays showing the date in MM/DD/YYYY format: 05/24/2013.

2500.00

State:  District:



The diagram shows three 16-bit shift registers connected in series. The first register has inputs M and M, and output 06. The second register has inputs D and D, and output 07. The third register has inputs Y, Y, Y, and Y, and output 2013. The registers are connected such that the output of the first is the input of the second, and the output of the second is the input of the third.

696.73

State:  District:

Three digital displays showing the date in MM/DD/YYYY format: 04/10/2013.

5000.00

State:  District:

8196.73

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB  
.

Form/Schedule: SB21B  
Transaction ID : SB21B.7319

This expenditure was made for promotion of the Social Security Institute PAC, its mission and to raise funds to support this mission. No portion of this expenditure was made on behalf of, or in opposition to, any specifically identified Federal candidate. This activity did not 'expressly advocate the election or defeat of any Federal candidate'.

Form/Schedule: SB21B  
Transaction ID: SB21B.7320

This expenditure was made for promotion of the Social Security Institute PAC, its mission and to raise funds to support this mission. No portion of this expenditure was made on behalf of, or in opposition to, any specifically identified Federal candidate. This activity did not 'expressly advocate the election or defeat of any Federal candidate'.

: 97 `A-G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB  
.

Form/Schedule: SB21B  
Transaction ID : SB21B.7323

This expenditure was made for promotion of the Social Security Institute PAC, its mission and to raise funds to support this mission. No portion of this expenditure was made on behalf of, or in opposition to, any specifically identified Federal candidate. This activity did not 'expressly advocate the election or defeat of any Federal candidate'.

Form/Schedule:  
Transaction ID:

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

SOCIAL SECURITY INSTITUTE PAC INC

SOCIAL SECURITY INSTITUTE PAC INC

4045.00

003

SOCIAL SECURITY INSTITUTE PAC INC

MM / DD / YYYY

1500.00

003

SOCIAL SECURITY INSTITUTE PAC INC

2000.00

7545.00

28691.12

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB

Form/Schedule: SB21B  
Transaction ID : SB21B.7321

This expenditure was made for promotion of the Social Security Institute PAC, its mission and to raise funds to support this mission. No portion of this expenditure was made on behalf of, or in opposition to, any specifically identified Federal candidate. This activity did not 'expressly advocate the election or defeat of any Federal candidate'.

Form/Schedule: SB21B  
Transaction ID: SB21B.7324

This expenditure was made for promotion of the Social Security Institute PAC, its mission and to raise funds to support this mission. No portion of this expenditure was made on behalf of, or in opposition to, any specifically identified Federal candidate. This activity did not 'expressly advocate the election or defeat of any Federal candidate'.



: 97 `A-G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB  
.

Form/Schedule: SB21B  
Transaction ID : SB21B.7325

This expenditure was made for promotion of the Social Security Institute PAC, its mission and to raise funds to support this mission. No portion of this expenditure was made on behalf of, or in opposition to, any specifically identified Federal candidate. This activity did not 'expressly advocate the election or defeat of any Federal candidate'.

Form/Schedule:  
Transaction ID: